

fectured with prickly heat continually bathe in the sea without any ill effects, and his statements are in conformity with those of others. I have no doubt that the poor lady, whose case I cited just now, would have been greatly benefited by a good washing with cold water at least before her eczema was fully developed. Indeed, when actual inflammation has occurred and becomes severe, as was the case in my patient, I can believe that any *abrupt* repression of the process might prove injurious. But this is not on account of any *materies morbi* being driven away from the part but because the inflamed tissue is not tolerant of any sudden change in its condition. Sir Thomas Watson relates how a woman who had scalded her arm, immediately after immersed it in cold water, but was obliged to desist because severe rigors were brought on thereby. My reason for not administering quinine from the first to my patient W. G., was based in good measure on the same kind of apprehension. The inflammation had made the tissues so irritable that there was reason to fear that the tonic might not have been borne well. In three days time, with the aid of salines and colchicum, this state had lessened, and then the remedy guarded with a little neutral salt had a speedily beneficial effect. The occurrence of furuncles towards the close of an attack of eczema, as in this instance, is by no means unfrquent.

There is another point which I wish you to remark—viz., the evident affinity between these summer skin eruptions, and the diarrhœas of hot weather. Both are essentially hyperæmiæ of vaso-motor nerve origin, one of the external; the other of the internal tegument. The much greater frequency of the latter depends probably on the greater supply of blood which the intestine receives, on the greater degree in which its vessels are under the sway of the sympathetic, and on the much greater delicacy of the epithelial investment of the membrane. The great prevalence of diarrhœa in tropical climates shows clearly that the influence of external temperature is felt throughout the body, as otherwise the presumption would be that, the blood being determined so freely to the skin and to its glands, there would be no tendency to hyperæmia of the internal mucous surface and its glands. Not only, however, is this very markedly the case, but another mucous tract the (uterine) is affected in a like way, and menorrhagia, as Sir Ranald Martin tells us, is a common occurrence. It seems to me very doubtful whether, what has been termed cutaneo-hepatic sympathy, is anything more than a part of that general paresis of arteries and their regulating nerves, which ensues as a result of a high temperature. Heat acting on the cutaneous nerves relaxes the vaso motor nerves of the superficial arteries, and of those of the internal organs, because in both instances it operates through the nervous centres.—*Medical Press and Circular*,